

KWAZULU-NATAL PROVINCIAL IMPLEMENTATION PLAN 2017-2022 PROGRESS REPORT - FY 2017/18

GOAL 1: ACCELERATE PREVENTION TO REDUCE NEW HIV AND TB INFECTIONS AND STIs

Indicator	Target	Performance
Number of new HIV infections*		61 501
Mother-to-child transmission (MTCT) rate at 10 weeks	<1%	0.71%
Delivery in 10 to 19 years in facility rate	8.6%	17.6%
Couple year protection rate	64.7%	46.4%
Number of medical male circumcisions (MMC) performed	138 863	200 188 (>100%)
Number of people tested for HIV	2 260 448	3 050 729 (>100%)
Number of people tested positive for HIV		252 520 (8%)
Number of male condoms distributed	185 574 089	75 557 900 (41%)
Number of female condoms distributed	3 635 243	1 721 584 (47%)
Number of learners reached through combination prevention interventions**		16 296
Percentage of schools providing enhanced Comprehensive Sexuality Education (CSE)**		36.3%

Sources – DOH Annual Report 2017/18, * Thembisa Model Estimates; ** DOE - EMIS

- At the end of 2017, 2 020 590, people were living with HIV in KwaZulu-Natal (KZN) province, including 110 089 children aged 15 years and less
- There were 61 501 total new infections in 2017 (incidence rate: 0.68%) of which 3 596 were among children aged 15 years and younger. Despite this, the overall number of people newly infected with HIV decreased by 7% between 2017 and 2016, from 65 893 to 61 501.

- The number of people HIV tested slightly decreased, however, the target for the financial year was exceeded
- The rate of HIV infection among babies born to HIV positive mothers decreased from 1.1% in 2016 to 0.71%, steadily moving towards the elimination of MTCT
- Notable improvement in the coverage of Medical Male Circumcision (MMC) services, MMCs performed increased by 39%, from 122 132 in 2016 to 200 188 in 2017
- Male condom distribution decreased substantially, deviating by 64% from the annual condom distribution target. Condoms (male and female) accounted for 21.4% of the total couple year protection rate in 2017
- The coverage of the Human Papilloma Virus (HPV) vaccine 1st dose, decreased by 42% between 2016 and 2017 and the 2nd dose slightly increased by 8%
- Total deliveries under 19 years comprised 17.6% of total deliveries, with deliveries 10-14 years comprising 1.9% of the total deliveries under 19 years
- A total of 4 760 787 people 5 years and older were screened for TB in 2017 and 82.6% (110 998) people living with HIV received IPT
- Contributing factors:
 - New infections and HIV tests** – Implementation of the Hlola Manje Zivikele Campaign, Universal Test and Treat (UTT), Provider Initiated Counselling and Testing (PICT), community-based testing
 - MTCT** - high ART coverage, initiation and linkage to treatment on the same day as HIV diagnosis, education to pregnant mothers, community based awareness programmes, compliance to policies and management practices
 - MMC** - Contracted private General Health Practitioners, active mobilisation of young men to undergo circumcision, collaborating with other stakeholders through the Isibaya Samadoda initiative and active monitoring of support partner data

- Contributing factors (Contd.):
 - **Male condom distribution** – Decrease due to change in distribution process; condoms distributed at primary distribution sites and no longer at facilities, challenges with condom distribution service provider
 - **Couple year protection** - Improved coverage of couple year protection through training and awareness programmes
 - **HPV** - Challenges with IT infrastructure resulting in the interruption of capturing information on HPV, lack of resources (i.e. vehicles), decrease in active school health teams
 - **Deliveries under 19 years** – Newly collected indicator, roll-out of the Department of Basic Education HIV policy, scale up of Adolescent Girls and Young Women (AGYW) targeted programmes.

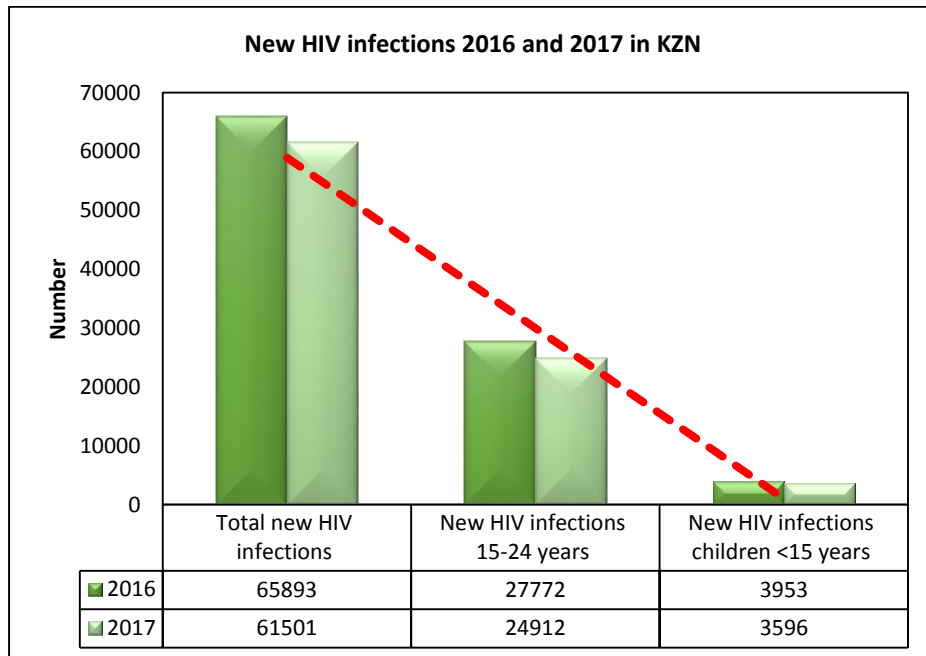
GOAL 2: REDUCE MORBIDITY AND MORTALITY BY PROVIDING TREATMENT, CARE AND ADHERENCE SUPPORT FOR ALL

Indicator	Target	Performance
Adult AIDS Mortality*		16 841
Percentage of people living with HIV who know their HIV status		1 446 089
Number of clients initiated on antiretroviral therapy (ART)	185 864	210 188 (>100%)
Number of clients living with HIV on ART (TROA)	1 570 051	1 271 116 (88%)
Percentage of adults living with HIV known to be on ART 12 months after starting^	94%	70.3%
People living with HIV viral load suppressed rate (VLS) at 12 months^	90%	94.0%
Percentage of all people/clients started on TB treatment+	90%	36 158/36 080 (>100%)
TB treatment success rate+	87%	(86.6%)

Sources – webDHIS; * Thembisa Model Estimates, ^Tier.net; +ETR.net

- The number of people dying from AIDS related causes decreased by 6% from 17 825 in 2016 to 16 841 in 2017 whereas the number of children under 15 years dying from AIDS related causes decreased by 13%, from 3 201 in 2016 to 2 775 in 2017
- An estimated 1 271 116 people remained on ART in 2017, representing an increase of 8% between 2016 and 2017. The overall ART coverage in the province was 62.7%, however, child ART coverage remained low (48.9%)
- High ART coverage among pregnant mothers, 97% of these women were initiated on ART in 2017
- The retention of adults on ART after 12 months of initiation in KZN was 70.3% in 2017 and for children aged 15 years and younger it was slightly higher i.e. 73.9%
- The attrition rates remain high between HIV testing and counselling and treatment, care and support services. Of those living with HIV at the end of 2017, 76% knew their HIV status, 88% of these were on ART, 67% had their viral loads done and 94% of these were virologically suppressed.

New HIV infections 2016 and 2017 in KZN



Significantly high HIV/TB co-infection rates, the co-infection rate remained steady in 2017 at 89.8% slightly higher than the rate of 88% in 2016

- A total of 15 290 clients were started on TB treatment in 2017, this was slightly lower than those started on treatment in 2016
- The TB treatment success rate in 2017 (86.6%) was also slightly lower compared to 2016 (88.7%)
- The death rate among TB clients remained stable at 3.2% , this was similar to the death rate reported in 2016

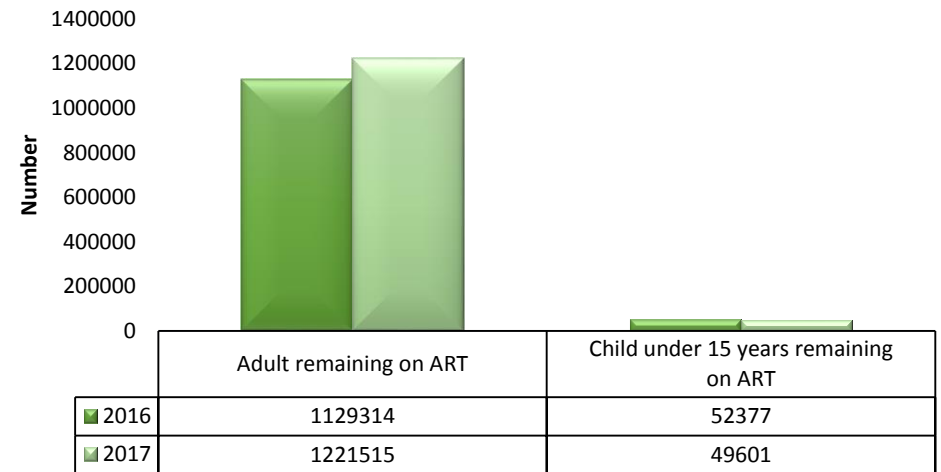
Contributing factors:

- **AIDS related deaths, TROA, 90-90-90** - Revision in the ART guidelines - UTT, community based testing. Challenges - backlog in capturing client information on Tier.net, human resource shortages i.e. shortage of data capturers at facility level, CCMDD at facilities not fully functional, complexities in testing children due to issues of consent
- **ANC ART Coverage** - Linkage to care and same day initiation on ART
- **Retention on treatment** - Challenges - clients experiencing difficulties with accessing health facility services, inadequate treatment literacy among clients, lack of integration between programmes/services, interruptions in the supply of drugs
- **TB /HIV co-infection and TB treatment** – intensified TB awareness, scale up of TB treatment adherence counselling. Challenges - IT infrastructure impacted negatively on data quality.

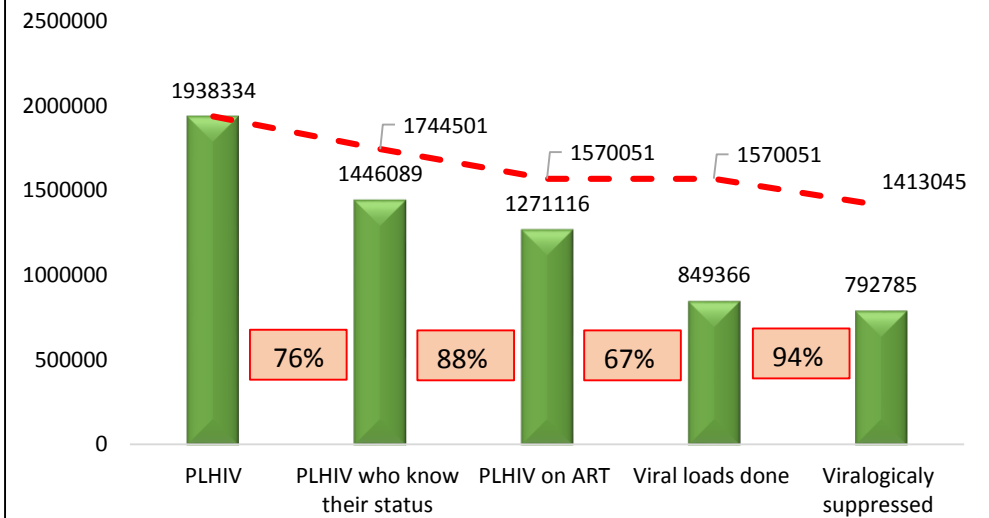
TB Cascade 2017/18

Headcount >5 years	TB screening >5 years	Presumptive TB cases	TB Testing	Clients testing TB positive	TB treatment initiation	TB treatment success
5 982 722	4 760 787	218 942	120 702	8 062	7 983	6 786
	80%	4.6%	55.1%	6.6%	99%	85%

Adults and Children remaining on ART 2016 and 2017 - KZN



90-90-90 Cascade Total Population 2017 KZN





GOAL 3: REACH ALL KEY AND VULNERABLE POPULATIONS WITH CUSTOMISED AND TARGETED INTERVENTIONS

Target group	Interventions	Doman
All key populations	<ul style="list-style-type: none"> Mapping of key populations Reprogramming exercise with key Populations 	Planning
Sex workers (SWs)	<ul style="list-style-type: none"> Developed creative spaces to discuss GBV and other related issues, Hosted 'No Violence Against Sex Worker Day - Say Her Name Event' Engaged DOE regarding access to ABET to improve employment prospects Launched newsletter 'Izwi Lethu' provides insight on personal experiences SWs Sensitizing communities regarding realities of sex work and promoting the decriminalization of sex work 	GBV Skills development/ economic empowerment Awareness Policy
LGBTI	<ul style="list-style-type: none"> Hosted provincial indaba on LGBTI sector planning Developed LGBTI sector plan (provincial and district) aligned to PIP & MDIPs Launched provincial LGBTI plan Establishment of LGBTI sectors at all levels and appointment of sector leaders and representatives Provision of services i.e. psychosocial support and HTS, Established KZN Task Team on Hate Crimes in collaboration with DOJ/CD Human Rights Advocacy Conducted campaigns related to LGBTI 	Planning and institutionalisation HTS Human rights Awareness
Adolescent Young Girls and Women (AGWY)	<ul style="list-style-type: none"> Participated in AYGW National Summit Participated in COP 18 and PEPFAR consultation with AGYW Provision of services i.e. HIV services, Isibindi programme, White door Centre of Hope – for victims, GBV services, SRH services Roll-out of peer-education and empowerment programmes i.e. Cash plus Care programme targeting AGWY, KGIS, Rise clubs Joint 16 Days of Activism Campaign Establishment of 'She Conquers' steering committees at the district level Hosted dialogues on GBV including sexual assaults, teen-parenting Distribution of pads to school girls 	HIV services GBV Economic empowerment
People who inject drugs (PWID)	<ul style="list-style-type: none"> Only one organisation providing services to PWID. A total of 13 767 PWID contacts were made with 661 PWID Provided needle and syringe services to PWID contacts Conducted 1 165 HIV tests done, Commenced provision of ART for PWID 	ART HTS
Youth	<ul style="list-style-type: none"> Continued roll-out of the HEAIDS First things First campaign at TVET colleges, conducted dialogues with students and HTS Skills development with a specific focus on youth with disabilities Distributed condom distribution in high burdened areas Hosted a silent protest against GBV, "First University (UniZulu) received accreditation as CCMDD site Hosted 'Graduate Alive' events 	Prevention Condom distribution ART Skills development GBV

Source – KZN Civil Society Forum Reports to the Provincial Council on AIDS



GOAL 4: ADDRESS THE SOCIAL AND STRUCTURAL DRIVERS OF HIV, TB

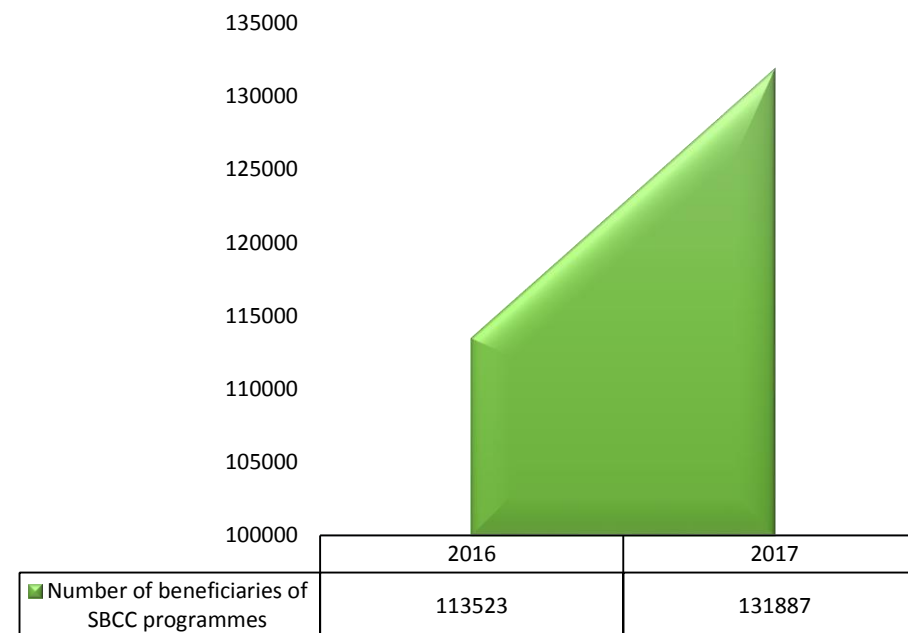
Indicator	Target	Performance
Number of children accessing services through drop in centres		59 894
Number of beneficiaries receiving DSD Social Behaviour Change (SBCC) programmes	175 741	131 887 (75%)
Number of organisations trained on SBCC programmes	230	251 (>100%)
Number of OVCs receiving psychosocial support services	95 714	104 863 (>100%)
Number of victims of crime and violence accessing services from funded VEP services	3 910	7 019 (>100%)
Number of children 18 years and below reached with substance abuse programmes	200 143	228 651 (>100%)
Number of people 19 years and older reached with substance abuse programmes	127 823	144 766 (>100%)
Number of people accessing food through DSD feeding scheme programmes	11 849	12 079 (>100%)

Source – Department of Social Development Annual Report 2017/18

- Increasing knowledge and promoting behaviour change remains at the foundation of the HIV response, the number of people reached with SBCC interventions increased by 16% from 113 523 in 2016 to 131 887 in 2017
- Slight decrease in the number of organisations trained on SBCC in 2017, where 251 organisations were trained compared to 258 organisations trained in 2016, however, the targeted for the quarter was achieved
- There was a 16% increase in the number of OVCs receiving psychosocial support services between 2016 (90005) and 2017 (104863)
- A total of 7 019 crime and violence victims accessed services from funded VEP service centres in 2017 compared to 6 267 in 2016
- In 2017, 228 651 children aged 18 years and below were reached through substance abuse prevention programs whereas 144 766 people aged 19 years and above were reached

- Those receiving food through the DSD feeding programmes decreased significantly by more than half, from 26 287 in 2016 to 12 079 in 2017, however, the target for the financial year was achieved
- Contributing factors:
 - SBCC** - more trained implementing SBCC initiatives, recruitment of additional social workers at HCBC sites
 - VEP** – intensification of prevention awareness of VEP programmes to improve uptake of services
 - Substance abuse** – intensified prevention and awareness campaigns, implementation of the social ills strategy.

Number of beneficiaries receiving SBCC programmes in 2016 and 2017 - KZN



GOAL 5: GROUND THE RESPONSE TO HIV, TB, AND STIs IN HUMAN RIGHTS PRINCIPLES AND APPROACHES

**Note: There is currently no available data on stigma and human rights from routine data sources.*

GOAL 6: PROMOTE LEADERSHIP AND SHARED ACCOUNTABILITY FOR A SUSTAINABLE RESPONSE TO HIV, TB AND STIs

Indicator	Target	Performance
Number of AIDS Council meetings chaired by the Premier	1	1
Number of District AIDS Council meetings chaired by the Mayor	11	9 (82%)

Source – Provincial Council on AIDS meeting minutes; District AIDS Council Quarter 4 2017/18 report

- There is strong support of AIDS Councils at the Provincial and District level, however, the support at the lower levels (i.e. Local AIDS Councils and Ward AIDS Committees lags behind
- Civil Society Chairpersons appointed at deputy chairs of AIDS Council meetings at all levels
- Conducted training of political leadership on their roles and responsibilities in the AIDS Councils for selected Local Municipalities
- Trained Ward AIDS Committee members on AIDS Councils and their roles and responsibilities
- All districts completed the developed of their MDIP matrix and 9 districts have developed the write-up of the MDIPs which have been signed off by the District Mayors
- Ongoing engagements (quarterly) take place between the PCA Secretariat and DAC/LAC secretariats
- Hosted DAC/LAC secretariat meetings at the provincial level prior to the Provincial Council on AIDS meeting

GOAL 8: STRENGTHEN STRATEGIC INFORMATION TO DRIVE PROGRESS TOWARDS ACHIEVEMENT OF NSP GOALS

Indicator	Target	Performance
Number of provincial HIV, TB and STI implementation plans	1	1 (100%)
Number of provincial HIV, TB and STI quarterly reports	4	4 (100%)
Number of provincial HIV, TB and STI annual reports	1	1 (100%)
Number of districts with HIV, TB and STI implementation plans	11	9 (82%)
Number of district HIV, TB and STI quarterly reports	44 (11 x 4 Quarters)	44 (100%)

Source – Provincial Council on AIDS meeting minutes; District AIDS Council 2017/18 report.

- Developed 4 quarterly Provincial Synthesis reports
- Developed 2 District Mayors commitments synthesis report – provides status update on actions against reported challenges at the PCA meeting
- Receive 11 DAC reports from all districts on a quarterly basis using standardized reporting template
- Held consultations with District stakeholders on the proposed indicators to track the HIV response for the period 2017-2022
- Provision of feedback to DAC secretariats on submitted DAC reports to the PCA

